

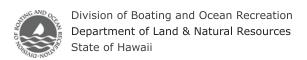
## APPLICATION FOR **MOORING PERMIT / MOORING WAITLIST**

Division of Boating and Ocean Recreation

Department of Land and Natural Resources, State of Hawaii



1. PERMIT INFORMATION		
Date:		
Location: Category: Received By:		
☐ I have NOT yet purchased or registered a vessel; add me to the waitlist. (Complete only sec. 1, 2, 6 & 7.)		
2. APPLICANT INFORMATION		
Name (Last): (First): (M.I.): Suffix:		
Date of Birth: / / Gender: Gender Gender Gender: Gender		
Employer:		
Phone (business): [ (home): Email:		
Mailing Address: Apt./#:		
City: State: Zip:		
Billing Address: Apt./#:		
City: State: Zip:		
3. VESSEL INFORMATION (If you have NOT yet purchased or registered your vessel, skip this step and proceed to section 6.)		
☐ Check if Same as Applicant		
Owner's Name (Last): (First): (M.I.): Suffix:		
**		
Owner's Name (Last): (First): (M.I.): Suffix:		
Owner's Name (Last):         (First):         (M.I.):         Suffix:           Date of Birth:         /         Gender:         Female         Male         Phone:		
Owner's Name (Last):         (First):         (M.I.):         Suffix:           Date of Birth:         / /         Gender:         Female         Male         Phone:           Co-owner's Name (Last):         (First):         (M.I.):         Suffix:		
Owner's Name (Last): (First): (M.I.): Suffix:  Date of Birth: / / Gender: □ Female □ Male Phone: (M.I.): Suffix:  Co-owner's Name (Last): (First): (M.I.): Suffix:		
Owner's Name (Last): (First): (M.I.): Suffix:  Date of Birth: / / Gender: □ Female □ Male Phone:   Co-owner's Name (Last): (First): (M.I.): Suffix:  Date of Birth: / / Gender: □ Female □ Male Phone:   Vessel Name: Port of Registry:   Port of Registry:   Port of Registry:   Output Description:   Date of Birth: Port of Registry:   Date of Registry:   Date of Registry:   Port of Registry:   Date of Registry:   Port of Registry:   Date of Registry:		
Owner's Name (Last):		
Owner's Name (Last): (First): (M.I.): Suffix:  Date of Birth: / / Gender: □ Female □ Male Phone:  Co-owner's Name (Last): (First): (M.I.): Suffix:  Date of Birth: / / Gender: □ Female □ Male Phone:  Vessel Name: Port of Registry:  Documentation Type: □ Vessel Registration □ Coast Guard Documentation □ Other:  Registration or Doc. No Expiration Date: / /		
Owner's Name (Last): (First): (M.I.): Suffix:  Date of Birth: / / Gender: □ Female □ Male Phone:  Co-owner's Name (Last): (First): (M.I.): Suffix:  Date of Birth: / / Gender: □ Female □ Male Phone:  Vessel Name: Port of Registry:  Documentation Type: □ Vessel Registration □ Coast Guard Documentation □ Other:  Registration or Doc. No Expiration Date: / /  Hull Manufacturer: Year Built: Length Overall: (feet) (inches)		





## APPLICATION FOR MOORING PERMIT OR MOORING WAITLIST (Continued)

4. VESSEL TYPE AND PROPULSION (If you have NOT yet purch	nased or registered your vessel, skip this step and proceed to section 6.)	
Vessel Type (✔one): ☐ Open Motorboat ☐ Motor Vessel (more than 65) ☐ Sailing Vessel ☐ Houseboat ☐ Runabout ☐ Aux. Powered Sailing Vessel ☐ Cabin Motorboat ☐ Thrillcraft ☐ Other:		
Principle Use (✔one): ☐ Pleasure ☐ Charter Fishing ☐ Commercial Fishing ☐ Commercial Passenger ☐ Dealer or Manufacturer ☐ Commercial Other:		
Primary Propulsion Type (✔one): ☐ Sail ☐ Power ☐ None If Power, Engine Type: ☐ Onboard ☐ Inboard  Fineing Manufacturers	d/Stem Drive	
Engine Manufacturer: Horsepower: Number of Engines: If Sail, Rigging Type: □ Sloop □ Schooner □ Three-Masted Schooner □ Four-Masted Schooner □ Ketch □ Brig □ Brigantine □ Barque □ Barquentine □ Fully Rigged Ship □ Snow □ Yawl □ Cutter □ Clipper		
Aux. Propulsion Type: ☐ Sail ☐ Power ☐ None ☐ Other: Engine Manufacturer:		
Fuel Type (✔one): ☐ Diesel ☐ Electric ☐ Gas ☐ Other (specify):		
5. VESSEL PURCHASED INFO (If you have NOT yet purchased or	r registered your vessel, skip this step and proceed to section 6.)	
I, the undersigned, (✔one) □ Purchased □ Leased □ Other ( the aforementioned vessel on (date): / / fro  The vessel described on this application is free of all liens, m  Provide the name or institution holding security interest.  Name (Last) or Institution:  Address:	nortgages, or other encumbrances except as follows:	
City:	State: Zip:	
Name (Last) or Institution (if jointly held):		
Address:	State: Zip:	
6. DECLARATION OF HAWAII RESIDENCY		
Proof of residency must be presented at Harbor office within seven (7) days of application submission. Failure to present proof will result in automatic denial of the application and forfeiture of fees. Applicant will be required to resubmit in person their application and documentation at a DoBOR office.   ☐ I claim legal residence in Hawaii.		
7. AGREEMENT & SIGNATURE		
I agree to comply with the provisions of the Hawaii Administrative Rules as promulgated by the Division of Boating and Ocean Recreation applicable to this permit.	Signature of Applicant Date	